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Request for Additional Resources for the UNFPA Programme of Assistance for the English- and Dutch-Speaking Caribbean Countries*

Report of the Executive Director

1. The Executive Director requests the approval of an additional $2.0 million for the second UNFPA programme of assistance (1997-2001) to the English- and Dutch-speaking Caribbean, thereby raising the total funding authority for the programme to $7.0 million. The current country programme was approved by the Executive Board in March 1997 for the four-year period 1997-2000 in the amount of $5 million, of which $4 million would be programmed from UNFPA regular resources and $1 million from other, including multi-bilateral, resources.

2. In September 2000, the programme was extended for one year, to the end of 2001, in order to allow for the completion of recently initiated programme activities, based on a projected additional expenditure of less than $1 million. However, expenditures for 1997-2000, for which final figures were obtained in May 2001, amounted to $6.2 million ($5.8 million from regular resources and $400,000 from multi-bilateral resources), thereby exceeding the projected expenditure level of $1 million. This was due to: (a) the delayed submission of expenditure reports from executing agencies; and (b) the need to implement key multisectoral activities not foreseen in the budget.

* Countries and territories covered under this programme are: Anguilla, Antigua and Barbuda, Aruba, the Bahamas, Barbdos, Bermuda, British Virgin Islands, Cayman Islands, Dominica, Grenada, Guyana, Jamaica, Montserrat, the Netherlands Antilles, St. Kitts and Nevis, St. Lucia, St. Vincent and the Grenadines, Suriname, Trinidad and Tobago, and Turks and Caicos.

3. The additional amount of $2.0 million being requested at the present time would be used to cover: (a) the over-expenditure incurred in 2000, including multisectoral activities not originally included in the programme budget, as reflected in document DP/FPA/2001/10/Part IV; (b) the completion of several critical programmed activities; (c) an evaluation of the current programme; and (d) the development of the next programme.

4. The current programme provides assistance to English- and Dutch-speaking countries in the Caribbean within a subregional framework, reflecting subregional priorities in the population sector. The programme was designed to promote a comprehensive approach to reproductive health and reproductive rights, with a focus on adolescents and youth, and particularly to have contributed to the removal of barriers to the provision of reproductive health services for adolescents and youth in countries of the region. In addition, it aims to incorporate population factors into development plans and poverty eradication strategies and activities. The Caribbean is made up of a number of countries that exhibit great diversity in terms of socio-economic development, and there are widespread areas of poverty.

5. In order to address population-related needs in a complex multi-country context, and in order to maximize programme impact, three countries – Guyana, Jamaica and Suriname – were selected as the main recipients of UNFPA country-level assistance, based on levels of poverty, the needs of young people and existing gender inequalities. In these three countries, UNFPA's strategy aimed at demonstrating the feasibility of an integrated minimum package of reproductive health care services for youth. The areas of population and development and advocacy had a much broader overall subregional coverage aimed at building national capacity to enable Governments to incorporate population issues into national programmes and at raising awareness for policy changes, particularly in terms of providing an environment that enables youth to obtain access to reproductive health services.

6. The approval of additional funds under the current programme would allow for the completion of activities programmed under the current cycle. In addition, it would allow for the appropriate evaluation of the current programme and the formulation of the new programme of assistance, which will be submitted to the Executive Board in June 2002.

Implementation of the programme and findings of the mid-term review

7. The mid-term review (MTR) held in December 1999 revealed significant advances in the advocacy and the population and development subprogrammes and identified major challenges to be addressed in the reproductive health subprogramme. The review noted that the goal, purposes, outputs and strategies of the current programme continued to reflect regional and national priorities and remained relevant.

8. The MTR noted that the population and development diploma course at the University of the West Indies had made progress, and efforts were under way to explore extending its outreach to the Eastern Caribbean through distance learning. It was noted that the advocacy subprogramme had mobilized a large number of youth and parliamentarians, particularly in support of adolescent reproductive health. Plans were made to launch a subregional movement of parliamentarians committed to population issues. In addition, significant interest in population had been generated among journalists and the mass media "gate keepers".

9. Under the reproductive health subprogramme, pilot sites were initiating the delivery of integrated services to adolescents including health and family life education, counselling and prevention of unwanted pregnancy, detection and referral for sexually transmitted infections (STIs), including HIV/AIDS, and for cases of violence against women, youth, and children, as well as referral for skills training, internships and mentoring.

10. Activities in the reproductive health subprogramme posed challenges in terms of project coordination and monitoring modalities. Although there were no doubts regarding the importance of this subprogramme, its implementation in selected areas of three very different countries, with different counterparts, proved more difficult than anticipated. The three components of the subprogramme were not progressing at the same pace, and expenditures were uneven. It was noted that project sites were located in some of the region's most vulnerable zones. The slow pace caused by these and other difficulties is also a contributing reason for the request for a one-year extension.

Justification for additional funds

11. The continuation of the above-mentioned activities in 2000 and their completion in 2001 were considered vital, albeit more costly than foreseen. In addition to the completion of these initiatives, there are other reasons for the need for additional funds:

(a) Expenditures incurred by several projects initiated in the 1992-1996 programme cycle were reported to UNFPA by executing agencies (mostly NGOs) only in the years 1997-2000. This resulted in their being recorded as expenditures for those years, thereby raising the total level of expenditures under the current programme cycle by $950,707;

(b) A number of multisectoral activities, such as the umbrella project, programme review and strategy development (PRSD) missions, support for the participation of Caribbean delegates in ICPD +5 and Beijing +5 regional meetings and special sessions of the United Nations General Assembly had to be funded through the programme of assistance, although not all of these were foreseen and budgeted when the programme was approved in 1997;

(c) Additional funds are required to cover the cost of conducting an evaluation of the programme and the programme formulation process during the third and fourth quarter of 2001. The complexity of a multi-country context is a factor that adds considerably to the cost of these exercises;

(d) Several policy and programme challenges need to be addressed as the current programme winds down and preparations are made for a new cycle of assistance, which will begin in January 2002.

Proposed activities to finalize the current programme

12. The subprogramme in the area of adolescent sexual and reproductive health would include the following activities:

(a) Strengthening of service delivery, including the STI and HIV/AIDS components of the pilot projects; facilitating the institutionalization of the different components into the primary health care system;

(b) Formalization within the public sector of the peer counsellor/educator scheme;

(c) Strengthening of information systems specific to adolescent sexual and reproductive health.

13. The subprogramme in the area of population and development strategies would include the following activities:

(a) Training in data analysis and evaluation in support of the region's 2000 round of population censuses;

(b) Completion of the institutionalization of the multidisciplinary modular training programme at the University of the West Indies.

14. The subprogramme in the area of advocacy would include the following activities:

(a) Continuation of vital advocacy to promote strategic alliances with new partners in the area of adolescent sexual and reproductive health;

(b) Implementation of the plan of action of the newly established Caribbean Movement of Parliamentarians for Population and Development (CMPPD) for work on adolescent health, gender equality and equity and male participation.

Recommendation

15. The Executive Director recommends that the Executive Board increase the funding authority for the English- and Dutch-speaking Caribbean countries by $2.0 million, raising the funding authority of the programme to $7.0 million ($6.5 in regular resources and $500,000 in other resources).

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